



CONSULATE GENERAL OF THE UNITED STATES

U.S. DEPARTMENT of STATE

**AMSTERDAM · THE NETHERLANDS**[About Us](#)[U.S. Citizen Services](#)[Visas to the U.S.](#)[U.S. Policy & Issues](#)[U.S. Information](#)<http://amsterdam.usconsulate.gov>**Credit Card Payment Form for Mail In Adult Passport/Card Application**

Please print this form, complete all items and sign. Incomplete forms and accompanying documents will be returned without processing.

CREDIT CARD TYPE:  
(PLEASE CHECK  
APPROPRIATE BOX)☐

MASTERCARD

☐

VISA

☐

DISCOVER

☐AMERICAN  
EXPRESS☐DINER'S  
CLUB**DEBIT CARDS AND OTHER CARDS CANNOT BE ACCEPTED**ISSUING BANK (i.e. Bank of  
America, Wells Fargo, etc.)

CREDIT CARD NUMBER:

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EXPIRATION DATE  
(MONTH/YEAR):

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Month

Year

CALCULATION OF AMOUNT TO BE CHARGED (see our website: [http://amsterdam.usconsulate.gov/ppt\\_fees.html](http://amsterdam.usconsulate.gov/ppt_fees.html))

ADULT PASSPORT(S)

HOW MANY


TOTAL AMOUNT


PASSPORT CARD(S)

OTHER SERVICE(S)

EXACT AMOUNT IN U.S. DOLLARS  
TO BE CHARGED TO CREDIT  
CARD

(in figures)

(in words)

PLEASE NOTE THAT PASSPORT FEES WILL BE CHARGED IN DOLLARS TO YOUR CREDIT CARD, AND THE EURO EQUIVALENT WILL DEPEND ON THE CARD ISSUER'S EXCHANGE RATE.

FULL NAMES AS SHOWN ON  
CREDIT CARD (PRINT)

I AUTHORIZE THE U.S. CONSULATE GENERAL IN AMSTERDAM TO CHARGE MY CREDIT CARD FOR THE ABOVE AMOUNT FOR U.S. PASSPORT(S) FOR (LIST NAMES OF PASSPORT APPLICANT(S):

SIGNATURE OF CARDHOLDER: